## **Keansburg School District**

## Written Translation Request Form

Please allow	5-7 working day	s to complet	e. Please fill or	ut a separa	te request for o	each document.
Today's Date:			_ Requested Due Date			
School/Depar	rtment:					_
Contact person:			Email address			
Type of docu	ıment to be traı	ıslated (plea	se submit one	Request	Form for eac	h document):
Letter	Newsletter	Flyer	Form	Notice	Survey	
Handout	Calendar	Policy	Brochure	Haı	ndbook	
Other:				_		
Number of I	Oocument Pages	:				
Title of Docu	ıment to be Tra	nslated:				_
• Please submit documents created in an editable format such as:						
Word Google Do			PowerPoint Excel			
(Please do not submit documents saved as PDF files, pictures or lock text boxes).						
	eting this requent nsburg.k12.nj.u					
	anslations (such st only (Please c			s or phone	e calls to pare	nts) require an
If you have a School)	ny questions, ple	ase email Bi	ilingual Teache	er Judith C	Sirillo ext. 6212	2 (Caruso
Thank	k you!					